

~~S E C R E T~~TAB AD R A F T

SUMMARY REPORT FORM
(Biographical Data)

Classification:

Place _____

Date _____

NAME _____

TITLE (if any) _____

ALIAS OR VARIANTS _____

NATIONALITY _____

ADDRESS _____

OCCUPATION _____

DATE & PLACE OF BIRTH _____

PRESENT POSITION _____

PARTY AFFILIATION _____

TYPE OF ACTIVITY _____

REPORTING AGENCY _____

DEPT. OF PRIMARY INTEREST _____

COMPLETE FILE MAINTAINED BY _____

DOSSIER MAINTAINED _____

(Dept)

(Yes or No)

~~S E C R E T~~

CIG Dir. #